

APPLICATION TO TRANSFER SCHOOL FEES TO ANOTHER PARTY

(Transfer to individual or individuals who have NOT signed the Enrolment Application)

I/We make this request with the knowledge that upon enrolment of my child/children <name of school>, I/We agreed to the following which was advised in writing on the enrolment application form:

ENROLMENT APPLICATION AGREEMENT

If this enrolment application is successful I/We agree to honour the financial commitments required by the school as per the Schedule of Fees and Charges. I/We undertake to read the Diocesan School Fee Policy which is available on the school's website to have full knowledge and understanding of this commitment and the consequences of not honouring it.

I/We understand that any transfer of fees from one party to another which includes a change of family invoicing may result in a change or removal of discounts which apply to siblings and/or families. I understand that these discounts and the procedure for their application will not be amended by the school.

I/We understand that the transfer of fees from one party to another does not release another party to the enrolment, of my/their obligation to pay fees. I/We understand that upon any default in payment by the parent/carer to whom fees have been transferred, may result in the fees being re-invoiced to all parties on the enrolment application. This will be completed without the consent of both parties and a request for payment will be made. The school acknowledges that this payment may be by an arrangement that is agreed upon by the school and the parent/carer.

I/We understand that any transfer request will not take place without the signed consent of both parties. The consent of both parties must be witnessed either by the school or an independent party or parties.

In the case of an external agency eg Public Trustee etc. The school will require the completion of this application. If their authority is revoked school fees will be re-invoiced to the parent/carer.

The school may decline this application if it determines that the transfer of school fees is not in the best interests of collection.

I acknowledge that I have read and understood the above. Please transfer fees as follows:

TRANSFER DETAILS:	PARENT/CARER ONE	PARENT/CARER TWO
Child/Children's Names: (First & Surname)		
School Fees & Levies are Currently Invoiced to:		
Transfer All Outstanding and Future School Fees & Levies To:	(EG 50% Peter Smith)	(EG 50% Jane Smith)
Address & Contact Details:		
I/We acknowledge the above terms and conditions. I/We consent to division of school fees and levies.	(Please Print Name)	(Please Print Name)
	(Signature)	(Signature)
	(Date)	(Date)
	INDEPENDENT WITNESS: (SCHOOL OR OTHER)	INDEPENDENT WITNESS: (SCHOOL OR OTHER)
	(Please Print Name)	(Please Print Name)
	(Signature)	(Signature)
	(Date)	(Date)

Office Use ONLY

Transfer of fees as detailed above approved	/ / (Signature & Date)
Transfer of fees completed	/ / (Signature & Date)
Fee statement and letter of confirmation forwarded to all parties	/ / (Signature & Date)
Application for Transfer, fee statement and letter of confirmation to be held with finance report & copy of all documentation held on enrolment file.	/ / (Signature & Date)
<i>Diocese of Bathurst/DOB10</i>	